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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application Of:)
K. Degen)
For: SPRING CLAMP WITH HOOK)
Serial No.: 10/792,008)
Filed: March 3, 2004)
Examiner: Ruth C. Rodriguez)
Art Unit: 3677)
Conf. No.: 4255)
Atty Dkt. No.: 113642-050)

CERTIFICATE OF TRANSMISSION BY FACSIMILE

VIA FACSIMILE TO (571) 273-8300
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

I hereby certify that the following documents are being facsimile transmitted to the United States Patent and Trademark Office (Fax No. 571-273-8300) on March 20, 2007.

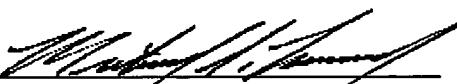
1. Amendment Transmittal (1 pg.);
2. Response to Office Action (6 pgs.).

Respectfully submitted,

EVEREST INTELLECTUAL PROPERTY LAW GROUP

Date: March 20, 2007

BY


Michael S. Leonard
P.O. Box 708
Northbrook, IL 60065
Phone: (847) 272-3400

MAR 20 2007

AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): Klemens Degen				Docket No. 113642-050	
Application No. 10/792,008	Filing Date 03/03/2004	Examiner Ruth C. Rodriguez	Customer No. 43793	Group Art Unit 3677	Confirmation No. 4255
Invention: SPRING CLAMP WITH HOOK					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-3189 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 <i>Signature</i>			Dated: March 20, 2007		
Michael S. Leonard, Reg. No. 37,557 Everest Intellectual Property Law Group P.O. Box 708 Northbrook, IL 60065 Phone: 847-272-3400 Fax: 847-272-3417			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____. <i>(Date)</i>		
<i>Signature of Person Mailing Correspondence</i>			<i>Typed or Printed Name of Person Mailing Correspondence</i>		
cc:					

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Michael S. LeonardRESPONSE TO OFFICE ACTION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This Response is submitted with in response to the non-final Office Action mailed December 21, 2006. Applicant requests amendment, reconsideration and allowance of the patent application.

Independent claim 1 has been amended to include allowable claim 2. The Office Action states that all of the other claims are also allowable. Thus, Applicant submits the application is in condition for allowance.

Listing of Claims begins on page 2 of this Response.

Remarks begin on page 5 of this Response.